

PTO/SB/01 (05-03)  
 Approved for use through 07/31/2006. OMB 0651-0032  
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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> <b>(37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted With Initial Filing <b>OR</b> <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	16970US01
	First Named Inventor	David A. Horsnell
	COMPLETE IF KNOWN	
	Application Number	10/550,807
	Filing Date	09/23/2005
	Art Unit	
Examiner Name		

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD**

the specification of which (Title of the invention)

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **March 25, 2004** as United States Application Number or PCT International

Application Number **PCT/GB2004/001377** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
0308788.1	Great Britain	March 26, 2003	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 4]

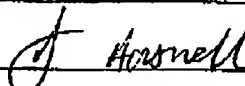
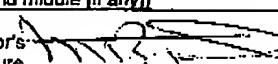
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TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  
 If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/01 (08-05)  
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## DECLARATION — Utility or Design Patent Application

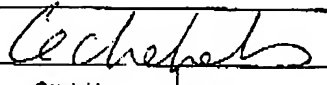

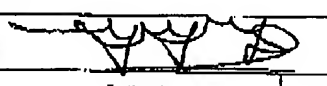
Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number <span style="border: 1px solid black; padding: 2px;">23446</span> OR <input type="checkbox"/> Correspondence address below			
Name Kirk A. Vander Loest McAndrews, Held & Malloy			
Address 500 West Madison Street, Suite 3400			
City Chicago	State IL	ZIP 60661	
Country USA	Telephone 312-775-8000	Fax 312-775-8100	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) David Andrew		Family Name or Surname HORSNELL	
Inventor's Signature 		Date 12/3/06	
Residence: City Cambridge	State	Country United Kingdom	Citizenship Great Britain
Mailing Address 3 Peme Road			
City Cambridge	State	Zip CB1 3RX	Country United Kingdom
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Matthew Brian		Family Name or Surname TOMLIN	
Inventor's Signature 		Date 9/3/06	
Residence: City Cambridge	State	Country United Kingdom	Citizenship Great Britain
Mailing Address 171 Church Street, Stapleford			
City Cambridge	State	Zip CB2 5DS	Country United Kingdom
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the two supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

[Page 2 of 4]

PTO/SB/02A (08-03)  
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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b>
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Page 3 of 4

Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Ammar		LECHEHEB	
Inventor's Signature 		Date 9 Nov 06	
Residence: City	Cambridge	State	Country United Kingdom
Mailing Address 3 The Paddock			
Mailing Address Harston			
City	Cambridge	State	Country United Kingdom
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Oliver John		PRIME	
Inventor's Signature 		Date 9/3/06	
Residence: City	Cambridge	State	Country United Kingdom
Mailing Address 5 Lingholme Close			
Mailing Address			
City	Cambridge	State	Country United Kingdom
Name of Additional Inventor, if any		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Michael James		FOX	
Inventor's Signature 		Date 9/03/06	
Residence: City	Rutland	State	Country United Kingdom
Mailing Address Silverstones, Church Lane			
Mailing Address Seaton			
City	Rutland	State	Country United Kingdom

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.83. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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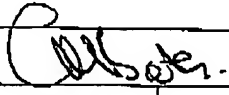
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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> <b>Supplemental Sheet</b>
--------------------	--

Page 4 of 4

Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))				Family Name or Surname	
Christopher Michael				BATES	
Inventor's Signature 				Date 20 Feb '06	
Residence: City	Northants	State	Country	United Kingdom	Citizenship Great Britain
Mailing Address 2 Malvern Close					
Mailing Address Boughton Spinney, Kettering					
City	Northants	State	ZIP	NN15 9JP	Country United Kingdom
Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))				Family Name or Surname	
Inventor's Signature				Date	
Residence: City		State	Country		Citizenship
Mailing Address					
Mailing Address					
City		State	Zip		Country
Name of Additional Inventor, if any				<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))				Family Name or Surname	
Inventor's Signature				Date	
Residence: City		State	Country		Citizenship
Mailing Address					
Mailing Address					
City		State	Zip		Country

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<b>POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM</b>	<b>Application Number</b>	10/550,807
	<b>Filing Date</b>	September 23, 2005
	<b>First Named Inventor</b>	David A. Horsnell
	<b>Title</b>	Method
	<b>Art Unit</b>	
	<b>Examiner Name</b>	
	<b>Attorney Docket Number</b>	16970US01

I hereby appoint:

☒ Practitioners associated with the Customer  
Number:

23446

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number

OR

☐ The address associated with Customer Number:

OR


<input checked="" type="checkbox"/> Firm or Individual Name	Kirk A. Vander Leest McAndrews Held & Malloy, Ltd.				
Address	500 West Madison Street				
Address	34 <sup>th</sup> Floor				
City	Chicago	State	IL	ZIP	60661
Country	USA				
Telephone	(312) 775-8000	Fax	(312) 775-8100		

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## SIGNATURE of Applicant or Assignee of Record

Signature		Date	9 Mar 06
Name	Ammar Lecheheb	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of six form is submitted.

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PTO/SB/81 (08-04)

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	<b>Title</b>	Method
	<b>Art Unit</b>	
	<b>Examiner Name</b>	
	<b>Attorney Docket Number</b>	18970US01

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Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature		Date	9/3/06
Name	Oliver John Prime	Telephone	
Title and Company			

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	<b>First Named Inventor</b>	David A. Horsnell
	<b>Title</b>	Method
	<b>Art Unit</b>	
	<b>Examiner Name</b>	
	<b>Attorney Docket Number</b>	16970US01

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City	Chicago	State	IL	ZIP	60661
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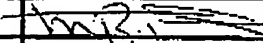
I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/86)

## SIGNATURE of Applicant or Assignee of Record

Signature		Date	9/3/06
Name	Matthew Brian Tomlin	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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<b>POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM</b>	<b>Application Number</b>	10/550,807
	<b>Filing Date</b>	September 23, 2005
	<b>First Named Inventor</b>	David A. Horsnell
	<b>Title</b>	Method
	<b>Art Unit</b>	
	<b>Examiner Name</b>	
	<b>Attorney Docket Number</b>	16970US01

I hereby appoint:

☒ Practitioners associated with the Customer Number: 23446

OR

☐ Practitioner(s) named below:

Name	Registration Number

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☐ The address associated with the above-mentioned Customer Number

OR

☐ The address associated with Customer Number:  

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Kirk A. Vander Leest McAndrews Held & Malloy, Ltd.				
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Address	34 <sup>th</sup> Floor				
City	Chicago	State	IL	ZIP	60661
Country	USA				
Telephone	(312) 775-8000	Fax	(312) 775-8100		


I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)*

**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	09/03/06
Name	Michael James Fox	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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	Title	Method
	Art Unit	
	Examiner Name	
	Attorney Docket Number	16970US01

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23446

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<input checked="" type="checkbox"/> Firm or Individual Name	Kirk A. Vander Leest McAndrews Held & Malloy, Ltd.				
Address	500 West Madison Street				
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City	Chicago	State	IL	ZIP	60661
Country	USA				
Telephone	(312) 775-8000	Fax	(312) 775-8100		

I am the:

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.

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## SIGNATURE of Applicant or Assignee of Record

Signature	<i>David A. Horsnell</i>	Date	12/3/06
Name	David Andrew Horsnell	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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PTO/SB/81 (06-04)  
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	<b>First Named Inventor</b>	David A. Horsnell
	<b>Title</b>	Method
	<b>Art Unit</b>	
	<b>Examiner Name</b>	
	<b>Attorney Docket Number</b>	16970US01

I hereby appoint:

☒ Practitioners associated with the Customer Number: 23448

OR

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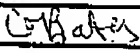
I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	20 Feb '06
Name	Christopher Michael Bates	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of six forms are submitted.

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